

Hire Form

Temporary, On-call and Student Employees

For use within MSU Extension Only

This form will be used **AFTER** the **TOC/Student Pre-Approval Request Form** has been **APPROVED**, you've received notification to move forward and the individual has been offered the position.

This document should accompany the electronic I-9 form

- The I-9 must be completed electronically, for instructions on this process please refer to the MSUE HR web page: http://od.msue.msu.edu/human_resources/internal_hiring_procedures_forms

The electronic I-9 and Hire Form must be received by MSUE HR at least three (3) weeks PRIOR to the date of employment:

MSU Extension
Attn: Human Resources Office
Justin S. Morrill Hall of Agriculture
446 W. Circle Drive, Suite 160
East Lansing, MI 48824

*Fields in red below are required

EMPLOYMENT INFORMATION

Temporary (50 – 74% - working 20-29 hours per week)

Temporary (75-100% - working 30-40 hours per week) *By selecting this employment category, the employee will potentially qualify for benefits under ACA and be subject to an additional monthly costs

On-Call

On-Call Minor (under the age of 18)

Student

Anticipated Hours worked per week:

The information below can be found on the completed Pre-Approval Request form that was sent back to you by MSUE HR. **This form will not be processed without the Job Reference # and Job Title.**

Job Reference #

Job Title:

JOB / ORGANIZATION INFORMATION

MSUE Institute/Organizational Unit:

Program / Initiative:

County:

District:

Work Location Address:

Work Location Phone Number

Name of Supervisor:

Supervisor's Institute/ Organizational Unit:

Desired Date of Hire:

Anticipated End Date:

EMPLOYEE INFORMATION

(please have new employee complete this section)

Personal Data

APID (only required for **MSU student employees**):

*(The name provided on this form must **match** what is reflected on the **Social Security card**.)*

Last Name:

First Name:

Middle Name:

Suffix (e.g. Jr.):

Gender: Male Female

U.S. Citizen: Yes No

Personal Email Address (to request NetID and initiate Background Screen):

Date of Birth

Social Security Number:

Veteran Status:

Non-Veteran
Vietnam-era Veteran
Armed Forces Service Medal Veteran
Recently Separated Veteran, and Date of Separation
Disabled Veteran
Special Disabled Veteran
Other Protected Veteran

Disability Status:

Yes No

Ethnicity:

Of Hispanic or Latino Origin
Not of Hispanic/Latino Origin

Identified Race(s) (Optional):

American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian or Other Pacific Islander
White

Address Information

Restrict Home Address from Publication? Yes No

Restrict Local Address from Publication? Yes No

Restrict Phone Numbers from Publication? Yes No

Permanent Address

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

Local Address (this address **only applies to MSU student employees**, i.e. Res. Hall or apt)

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

Phone Numbers

Home Phone Number:

Cell Phone Number:

Emergency Contact Information

First Name:

Last Name:

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

Phone Number:

Employee Relative Information

Does the employee have any relatives who work in the department where the employee is being hired? Yes No

If yes, will they be supervising the employee? Yes No

Relatives Name:

Relationship:

Employment Related Questions

The University will conduct a criminal records background check on all prospective employees. A "yes" response will not automatically disqualify an applicant from employment consideration. Each applicant will be evaluated based on the nature of the crime, severity of offense, when it occurred, and the duties and responsibilities of the position for which an individual is being considered.

- Has the applicant ever been convicted of a crime? Yes No
- Are there criminal charges pending against the applicant at this time? Yes No

Please describe the nature of the crime(s) or charge(s), the date and place of the offense, and the legal disposition of the case:

Supervisors Name (PRINTED):

Signature of Supervisor:

Date:

Signature of Employee:

Date:

Student Employment Questions – (this section is only required for MSU Students)

- Are you authorized to work in the U.S? Yes No
- Are you currently enrolled for courses at Michigan State University? Yes No
- Are you currently working on campus or have you in the past? Yes No
- Do you have work study? Yes No
 - If yes, how many hours?

Student Internship Information - (this section is only required for student interns)

Internship End Date (this date cannot exceed one year from the start date of the internship):

Student/Intern MSU email address:

Supervisor email address:

By offering an MSU student an internship opportunity, you understand that:

Supervisor and intern will submit a signed Internships@State Learning Agreement outlining learning goals within two weeks of the intern start date

Supervisor will provide intern with focused direction and feedback

Supervisor and intern will complete, discuss and submit midterm and final evaluations

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Student Signature :

Date :